2015 IADDA Annual Conference Registration Form Hilton Lisle/Naperville, 3003 Corporate West Drive, Lisle, IL September 9-10, 2015

Pre-Conference: September 8, 2015

Hotel Deadline - August 17, 2015 (630.505.0900)

The registration deadline is August 23, 2015. Walk-ins are accepted, space permitting - \$25/fee.

name:			
Agency (if applicable):			
Title:			
Address:			
City:		State:	Zip:
Phone:	Fax:	Emai	l:
Registration Fees Full Conference: Includes Pre-Co IADDA/ICOY Member - \$285 Please check which Pre-Conferent Mental Health First Aid Ethics Reconsidered: Ch	Nonmember- S nce Workshop you will for Youth (pre-registra	\$335 attend ition required)	
Pre-Conference Only (Septembe IADDA/ICOY Member - \$50 Please check which Pre-Conferer Mental Health First Aid Ethics Reconsidered: Ch	Nonmember - nce Workshop you will for Youth	attend	ionals and Supervisors
Wednesday Only (September 9) ☐ IADDA/ICOY Member - \$190	□ Nonmembe	er - \$230	
Thursday Only (September 10) ☐ IADDA/ICOY Member - \$190	☐ Nonmembe	er - \$230	
Payment Information (Check One) Check enclosed (Paya	able to IADDA)	Bill my credit car	d - Complete information below. Print clearly.
Circle one: Visa MC	AMEX	Total Amount	to be billed:
Cardholder's Name:			
Expiration Date:		Card #:	
Signature:		Date:	
IADDA must be informed of your specific Mail with payment to: IADDA, 93	ecial needs by August 1 37 S. Second Street, Spi	.5, 2015 in order to accomr	istration form a full description of your needs. nodate them.
You may register by fax if using cred Questions? Contact Pel Thomas at 2		or pthomas@iadda.org.	

